Declar	ation	Cont	trol N	ımbe	r (D(CN)																							
00]-]-]-	4			IF	RS Us	e Onl	y—Do	not w	rite or	stap	e in th	ıs spa	ace.					
Form Departme							U.S fo		n-l	_in	e :		vic	ce	Ele	ect	ro	nic	F			1				ОМВ	No. 1		
Internal R			· ·			1					<u>></u> s	ee in	stru				ck.	····					_		<u> </u>				
Use th	bel.	L A B E														Spouse's social security number													
Otherv please print o type.	•	HER		Home address (number and street). If a P.O. box, see instructions. Apt. no.										Telephone number (optional) () For Paperwork Reduction Act Notice, see instructions.															
		E	City																										
If your using																		ou fil	ed a	Fed	dera	l inc	ome	e ta	ix re	eturn	for	thos	e years
Part]	Tax	Ret	urn l	Info	rma	tion	(Wł	nole	dol	lars	onl	y)																
1 Tot	1 Total income (Form 1040, line 23; Form 1040A, line 14; Form 1040EZ, line 4)												1																
2 Tot	al ta	x (Fo	rm 10	40, li	ne 5	3; F	orm ¹	1040	A, lir	ne 2	?7; F	-orm	10	40E	Z, lii	ne 8)					•		2	2				
3 Fed			me ta Form(s									orm 1 										7).	lf	_3	3				
4 Re	fund	(Forn	n 104	0, lin	e 62	; Fo	rm 1()40 <i>F</i>	, line	e 30); Fo	orm '	104	0EZ	', line	e 9)						٠		4					
5 Am																								5	5				
Part			ect C		•																								
orms here.	6	Nam	ne of f	inand	cial in	nstiti	ution	and	, if a	ppli	cab	le, b	rand	ch r	name	· _													
Attach Copy B of your Forms W-2, W-2G, and 1099-R here.	7	Rou	ting tr	ansit	num	nber	(RTN	I)											The f be 01							ΓN mu 32.	ıst		
Copy B V-2G, an	8	Dep	ositor	acco	ount	num	ber (DAN) [1					
Attach W-2, V	9	Туре	of ac	cour	nt:			Sav	ings] CI	hecl	king															
	10	Owr	ershi	of a	ассо	unt:		Self	:			□ Sp	oou	se			S	Self a	and	Spo	use								
Part		De	clara	tion	of 7	Гахр	aye	r																					
Under pmy on- shown i lines of and be electror service be dire informa	line s n Par my 1 lief, r lic po provi	ervice t I abo 993 Fe ny retu ortion o der. If I depos	providence agreederal in the second agreed a	er for ee with incom true, o return omple is de	trans the tax correct be teted F signa	miss amou retur et, ar ransr art II ated	ion to ints sh n. To nd cor nitted above in Pa	the nown the to the to the to the	IRS a on the est o e. I o ne IRS nsent	nd the confirmation of the consection of the con	he a rresp kno ent t my tmy tmy	moun condir cwledg that the on-lin refur hat the	nts ng ge he ne nd		and spoul l und tax l and auth	elect elect use as dersta iabilit pena orize	ed [s an and y, I alties th	Direct ager that will resident will resident	t Dep t Dep nt to r if the email the p tS to	posit osit, eceiv IRS on liab proce dis	this the the does le fo	be I is an e refu not r the r the g of e to	irrev nd. It recei tax I my my	red /oca f I ha ive f liabil ret on	I. If able ave f full a lity a urn n-lin	I have appoint filed a and tire and all or re	e filed intme balar mely r Il app efund rvice	d a joent of nce d paymolicabl	ether my bint return the other ue return, ent of my le interest lelayed, il vider the
Sign		L																											
Here			Your	signat	ure									Date	•		Spo	ouse'	s sigi	nature	e. If a	joint	retu	rn, E	BOTE	-I mus	t sign	1.	Date

Cat. No. 15907C

Paperwork Reduction Act Notice

We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is 15 minutes.

If you have comments concerning the accuracy of this time estimate or suggestions for making this form more simple, we would be happy to hear from you. You can write to both the Internal Revenue Service, Attention: Reports Clearance Officer, T:FP, Washington, DC 20224; and the Office of Management and Budget, Paperwork Reduction Project (1545-1397), Washington, DC 20503. DO NOT send this form to either of these offices. Instead, see When and Where To File below.

When and Where To File

This form must be mailed to the Austin Service Center, P.O. Box 149156, Austin, TX 78714-9156 on the next working day after you have received acknowledgment from your on-line service provider that the IRS has accepted your electronically filed return. Although in the past you may have sent your paper documentation to another service center, your Form 8453-OL must be filed with the Austin Service Center because it has accepted your electronically filed return.

Line Instructions

Boxes

Declaration Control Number (DCN). The DCN is a 14-digit number assigned to your return by your on-line service provider. It is included in your acknowledgement message. The number should be clearly typed or printed, one digit per box, in the upper left corner of Form 8453-OL as follows:

Entry

1–2	File identification number (always "00")
3–8	Electronic filer identification number (EFIN) assigned by the IRS
9–11	Batch number (000 to 999) assigned by your on-line service provider
12-13	Serial number (00 to 99) assigned by your on-line service provider
14	Year digit (for 1994, the year digit is "4")

Example. The EFIN is 509325. The batch number is 000. The serial number is 56. The DCN should be 00-509325-00056-4.

Name, Address, and Social Security Number. If you received a mailing label from the IRS, place the label in the name area. Cross out any errors and print the correct information. Add any missing items, such as apartment number. If you did not receive a label, print or type the information in the spaces provided. Make sure your social security number (SSN) is clear and correct. If a joint return, be sure you enter your SSN next to your name.

P.O. Box. If the post office does not deliver mail to your home and you have a P.O. box, enter the box number instead of your home address.

Note: The address must match the address shown on your electronically filed return.

Part I—Tax Return Information

Line 3. Include any withholding from your Form(s) 1099 in the amount you enter on line 3. Also, be sure to check the box on line 3.

Line 5. For balance due returns, do not attach your check or money order to Form 8453-OL. Instead, mail it with Form 9282, Form 1040 Electronic Payment Voucher, to the Austin Service Center address shown on that form.

Part II—Direct Deposit of Refund

Complete this part if you can elect to have your refund directly deposited.

Line 7. The routing transit number (RTN) must contain nine digits. If the RTN does not begin with 01 through 12 or 21 through 32, the Direct Deposit request will be rejected and a paper check will be sent.

For accounts payable through a financial institution other than the one at which the account is located, you must enter the RTN of the bank or institution where the account is located. You may find this information on your account statement or account identification card.

If you have any doubt about the correct RTN, contact your financial institution and ask for the correct RTN for Direct Deposit (Electronic Funds Transfers).

Note: Some financial institutions may not accept Direct Deposits into accounts that are payable through another bank or financial institution, including credit unions.

Line 8. The depositor account number (DAN) can contain up to 17 alphanumeric characters. Include

hyphens but omit spaces and special symbols. If fewer than 17 characters, enter the number from left to right and leave the unused boxes blank.

Line 10. The account designated to receive the Direct Deposit must be in your name. If your filing status on the return is married filing jointly, the account can be in either or both spouses' names. If your filing status is married filing separately, the account can be in your name, or it can be a joint account in both spouses' names.

Note: The account cannot include the name of any other person unless your filing status on the return is married filing jointly or married filing separately, and your spouse is the other name on the account.

Some financial institutions do not permit the deposit of a joint refund into an individual account. The IRS is not responsible when a financial institution refuses a Direct Deposit for this reason.

Part III—Declaration of Taxpayer

Your electronically transmitted income tax return will not be considered complete, and therefore, filed, unless and until the IRS receives your signed Form 8453-OL. If a joint return, your spouse must also sign the form.

Your signature allows the IRS to disclose to your on-line service provider the reason(s) for a delay in processing the return or refund. It also allows the IRS to advise your on-line service provider if your Direct Deposit election will not be honored.

Refunds. Your refund should be issued within 3 weeks after the IRS has accepted your return. If you elect to have the refund directly deposited into your checking or savings account, your account may be credited even sooner.

Automated Refund Information.

Refund information is available on Tele-Tax 3 weeks after the IRS has acknowledged receipt of your return. If you live in Kansas, New Mexico, Oklahoma, or Texas, you may call 1-800-829-4477. If you don't live in one of these states, you may call either (214) 767-1792 or (713) 541-3400. These are not toll-free calls.

Should you have questions prior to this 3-week period or you fail to receive complete information from Tele-Tax, you may call the Austin Service Center at (512) 462-8900 (Ext. 7197). This is not a toll-free call. But before you call, you will need to know your DCN (found in the upper left corner of your Form 8453-OL) and the acknowledgment date of your electronic return.